PTO/SR/17 (12-04v2)

Date

2007

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2007				U.S. Patent ar	Appr	oved for use through	07/31/2006. OMB 0651-0032 PARTMENT OF COMMERCE	
Underwork Reducti			o respoi	nd to a collection o	f informat	ion unless it displays	a valid OMB control number	
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known				
				Application Number 09/429		9/429,331	29,331	
FEE TRANSMITTAL				ling Date	0	October 28, 1999		
For FY 2005			Fi	rst Named Inver	ntor LI	LISA PAIGE, ET AL.		
Applicant ships and large				xaminer Name	W	Wessendorf, Teresa D.		
Applicant claims small entity status. See 37 CFR 1.27				rt Unit	16	1639		
TOTAL AMOUNT OF PAYMENT (\$) \$790.00				ttomey Docket N	lo. 10	102555-400 (180/110/6)		
METHOD OF PAYMEN	T (check all	that apply)				*****		
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<del> </del> 1		Money Order L N					<del></del>	
Deposit Account Deposit Account Number: 23-1665 Deposit Account Name: Wiggin and Dana LLP								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s)								
under 37 CFR 1.16 and 1.17  WARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card								
information and authorization			Intorm	ation should not	De Includ	ied on this form. Pro	ovide credit card	
FEE CALCULATION								
1. BASIC FILING, SEAI	RCH. AND	EXAMINATION FEE!	s			:		
FILING FEES SEARCH FEES EXAMIN						NATION FEES		
Application Type	Fee (\$)	<u>Small Entity</u> Fee (\$) <u>Fee</u>	<u>s</u> (\$)	mall Entity	Fee (\$	Small Entity Fee (\$)	Fees Paid (\$)	
Utility		150 50		Fee (\$) 250	200	100		
Design	200	100 100		50	130	65		
Plant	200		-					
		100 30		150	160	80	<del></del>	
Reissue	300	150 50		250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FE	ES					Fee (\$)	Small Entity Fee (\$)	
Fee Description Each claim over 20 (including Reissues)						50	25	
Each independent claim over 3 (including Reissues)						200	100	
Multiple dependent claims						360	180	
Total Claims						Multiple De	pendent Claims	
O - 20 or HP = 0 x 0 = 0  HP = highest number of total claims paid for, if greater than 20.						Fee (\$)	Fee Paid (\$)	
						0		
Indep. Claims 0 - 3 or HP =	Extra Clain	<u>ns Fee(\$) F</u> x ∩ =	Fee Pa			-		
HP = highest number of inde								
3. APPLICATION SIZE	FEE							
If the specification and								
		, the application size					each additional 50	
sheets or fraction to Total Sheets	Extra Shee	35 U.S.C. 41(a)(1)(0 ets Number of 6	o) and <mark>each a</mark>	us/Crk 1.160 dditional 50 or	(S). fraction	thereof Fee	(\$) Fee Paid (\$)	

4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) 0 Other (e.g., late filing surcharge): REQUEST FOR CONTINUED EXAMINATION 790.00 SUBMITTED BY Registration No. Telephone Signature 39,197 860.297.3716

(Attorney/Agent)

(round up to a whole number) x

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Name (Print/Type) Todd E. Garabedian, Ph.D.

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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